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CONFIRMATION NO. 1029

Bib Data Sheet

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|--|---|-------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/646,881   | <b>FILING OR 371(c) DATE</b><br>08/21/2003<br><b>RULE</b>   | <b>CLASS</b><br>600           | <b>GROUP ART UNIT</b><br>3736   | <b>ATTORNEY DOCKET NO.</b><br>53640.0001 ISHLER |                                |
| <b>APPLICANTS</b><br>Larry W. Ishler, Erie, PA;<br><b>** CONTINUING DATA *****</b><br><b>** FOREIGN APPLICATIONS *****</b><br><b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b><br><b>** 11/19/2003</b>  |   |                               |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>PA | <b>SHEETS DRAWING</b><br>2  | <b>TOTAL CLAIMS</b><br>11                       | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>LARRY W. ISHLER<br>4258 WEST 28th STREET<br>ERIE ,PA 16506   |   |                               |   |   |                                |
| <b>TITLE</b><br>NON-INVASIVE BLOOD GLUCOSE MONITORING SYSTEM   |   |                               |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>675  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |